

2002 CAMPAIGN CONTRIBUTIONS AND EXPENSES

State of Nevada

GENIE OHRENSCHALL

NEVADA STATE ASSEMBLY

12

Name (print)

Office (if applicable)

District (if applicable)

1124 South 15th Street, Las Vegas, NV 89104-1740

(702) 384-5992

Mailing Address (include city and zip code)

gohrenschall@asm.state.nv.us

Telephone No.

E-Mail Address

Select Appropriate Box(es) ☒ CANDIDATE ☐ PAC ☐ BAG ☐ POL PRY ☐ IND EXP ☐ AMENDED☒ Report #1 — Due August 27, 2002

Office with a 2-year term Period: Jan. 5, 2001 — Aug. 22, 2002

Office with a 4-year term Period: Dec. 20, 1998 — Aug 22, 2002

Office with a 6-year term Period: Dec. 6, 1996 — Aug 22, 2002

BAGs only: Period: Dec. 7, 2000 — Aug 22, 2002

☐ Report #2 Due — October 29, 2002

Period: Aug. 23, 2002 — Oct. 24, 2002

☐ Report #3 Due — January 15, 2003

Period: Oct. 25, 2002 — Jan. 3, 2003

BAGs only: Period: Oct. 25, 2002 — Dec. 5, 2002

BALANCEThis figure should reflect the balance shown on your last Disposition of Unspent Contributions Report, or last Contributions & Expenses Report, if any No Balance (0)**CONTRIBUTIONS SUMMARY**

Contribution means a gift, loan, conveyance, deposit, payment, transfer or distribution of money or anything of value other than the services of a volunteer received. (NRS 294A.007)

- | | |
|---|-------------|
| 1. Total amount of monetary contributions in excess of \$100 | \$30,200.00 |
| 2. Total amount of monetary contributions of \$100 or less | \$860.00 |
| Actual number of monetary contributions of \$100 or less <u>14</u> | |
| 3. Interest and income earned on contributions, if any | <u>0</u> |
| 4. TOTAL AMOUNT OF ALL MONETARY CONTRIBUTIONS (add lines 1 through 3) | \$33,060.00 |
| 5. Total amount of In Kind Contributions | \$500.00 |

EXPENSES SUMMARY

- | | |
|--|-------------|
| 6. Total amount of monetary expenses in excess of \$100 | \$14,228.00 |
| 7. Total amount of monetary expenses of \$100 or less | \$1,199.69 |
| 8. Expense for filing fee | \$100.00 |
| 9. TOTAL AMOUNT OF ALL MONETARY EXPENSES (add lines 6 through 8) | \$15,527.70 |
| Remaining Balance (Subtract line 9 from 4) | \$17,532.30 |
| 10. Total amount of In Kind Expenses | \$500.00 |

AFFIRMATION

I declare under penalty of perjury that the foregoing is true and correct.

Signature

Genie Ohrenschall

Date Executed On

8/27/02RCVD-8-27-02
CERT. MAIL
ON TIMECLERK OF COUNTY
CLERK DEPT
AUG 29 P 4:13

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